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(to be used for all correspondence after initial filing)

		Application Number	10/713,576
		Filing Date	11/12/2003
		First Named Inventor	Kapur
		Art Unit	2167
		Examiner Name	Le, D. M.
Total Number of Pages in This Submission	2	Attorney Docket Number	017887-011010US

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i>
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<input type="checkbox"/> Response to Missing Parts/Incomplete Application	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Townsend and Townsend and Crew LLP Phillip H. Albert	
Signature		
Date	Reg. No. 35,819 August 25, 2005	

CERTIFICATE OF TRANSMISSION/MAILING

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AUG 29 2005
PATENT & TRADEMARK RESEARCH

**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF
CORRESPONDENCE ADDRESS**

Application Number	10/713,576
Filing Date	11/12/2003
First Named Inventor	Kapur
Art Unit	2167
Examiner Name	Le, D. M.
Attorney Docket Number	017887-011010US

To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

- all the attorneys/agents of record
- all the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- all the attorneys/agents associated with Customer Number 20350

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

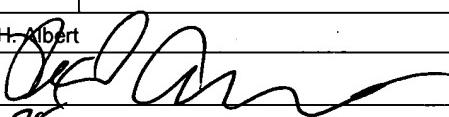
The reasons for this request are: Client requests to transfer matter

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Telephone	Fax		
Name	Philip H. Albert		
Signature			Registration No. 35,819
Date	August 29, 2005		

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.